



# The Commonwealth of Massachusetts

Division of Marine Fisheries

251 Causeway Street, Suite 400

Boston, Massachusetts 02114-2152

(617) 626-1520

## DEALER LICENSE APPLICATION

This is the application you requested for a Massachusetts Saltwater Dealer License. Please complete both sides of the application and return to the above address.

PLEASE TYPE OR PRINT INFORMATION CLEARLY:		<b>Contact Information:</b>	
Business Name _____		Telephone #: (_____) _____ - _____	
Location: Street _____	City/Town _____	State, Zip Code _____	Country _____
Mailing Address (If different than above) _____		City/Town _____	State, Zip Code _____
Country _____		Name of Contact Person _____	
E-Mail Address _____		If you would like join DMF's listserv for automatic e-mail updates, send an e-mail to: <b>join-marinefisheries@listserv.state.ma.us</b> with nothing in the subject or body.	
<b>Residency Status:</b> Ma Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Dealer License Number:</b> _____ (Do not write - leave blank)	

### DOR Affidavit

By statutory mandate of C. 233 of the Acts of 1983, the Dept. of Revenue is requiring the enclosed affidavit certifying your compliance with the Revenue Laws of the Commonwealth. Failure to accurately execute the enclosed affidavit will result in the non-issuance of your license. Should you have any questions you may contact the Dept. of Revenue at 1-800-392-6089.

Pursuant to M.G.L. Ch. 62c, s. 49A, I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Social Security No. or Federal ID No. \_\_\_\_\_

Signature of Individual or Corporate Name \_\_\_\_\_

Corporate Officer (if applicable) by: \_\_\_\_\_

**Dealer License and Endorsement(s) Selection:** Please select **only one** dealer category from the license list below. Select only those endorsement(s) for which you have been approved. Each dealer license type requires additional forms as explained on page 2 of this application. If you do not have all the forms or information you need to complete this application, contact the Boston office for assistance.

LICENSE TYPE	MASS RESIDENT		NON-RESIDENT		ENDORSEMENTS	
					PRODUCTS	ACTIVITIES
BAIT DEALER	<input type="checkbox"/> \$65	<input type="checkbox"/> \$130	<input type="checkbox"/> BAIT	<input type="checkbox"/> FISH PROCESSING		
RETAIL BOAT	<input type="checkbox"/> \$65	<input type="checkbox"/> \$130	<input type="checkbox"/> FINFISH	<input type="checkbox"/> LOBSTER PROCESSING		
RETAIL STORE	<input type="checkbox"/> \$65	<input type="checkbox"/> \$130	<input type="checkbox"/> LIVE LOBSTERS	<input type="checkbox"/> SHELLFISH PROCESSING		
RETAIL TRUCK	<input type="checkbox"/> \$65	<input type="checkbox"/> \$130	<input type="checkbox"/> LOBSTER/CRAB MEAT			
WHOLESALE BROKER	<input type="checkbox"/> \$130	<input type="checkbox"/> \$260	<input type="checkbox"/> NORTHERN SHRIMP			
WHOLESALE DEALER	<input type="checkbox"/> \$130	<input type="checkbox"/> \$260	<input type="checkbox"/> SCALLOP MEAT			
WHOLESALE TRUCK	<input type="checkbox"/> \$130	<input type="checkbox"/> \$260	<input type="checkbox"/> SHELLFISH			

Select all products and activities that apply.

Use the following checklist to reduce the risk of making errors in completing this application, and a subsequent delay in processing. Please allow 3 weeks for processing.

- ☐ Complete all the requested information above, including the DOR affidavit.
- ☐ Submit additional information as required (additional requirements are explained on the other side of this form).
- ☐ Submit a check or money order made payable to the Commonwealth of Massachusetts.
- ☐ Sign your application below, and return to the Division of Marine Fisheries at the address listed above. Thank you!

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Bait Dealer License:**

- Allows the holder to take and sell marine bait.
- No inspection is required.
- Consult local regulations (i.e. on worms, eels, etc.)

**Retail Boat Seafood Dealer License:**

- Allows the holder to sell "whole" fish and lobsters from his/her boat only (does not include shellfish).
- A commercial fisherman's permit is required in addition to this permit.
- A boat waiver (**\*see below**) must be filed in lieu of a health inspection.

**Retail Seafood Dealer License:**

- Allows the holder to sell raw fish, whether frozen or unfrozen, shellfish and lobsters at one retail location.
- The holder must purchase shellfish only from a holder of a wholesale dealer or wholesale truck permit, or from a certified out-of state wholesale dealer. Shellfish **CANNOT** be purchased directly from a harvester.
- Does not allow the holder to shuck, relabel or repack shellfish.
- An approved inspection from the Division of Food and Drugs must be submitted to Division of Marine Fisheries.
- The name and address must be the same on the inspection report and permit.
- This permit may be endorsed for bait (excluding shellfish). The inspection must specifically state "**Approved for retail and bait license**".

**Retail Seafood Truck Dealer License:**

- Allows the holder to sell fish or lobsters at retail from a mobile unit (does not include shellfish).
- Does not allow the holder to process, fillet, shuck, cook, etc.
- An inspection is required from a town or county Board of Health.
- A copy of the inspection must be submitted with the application.
- The name and address must be the same on the inspection report and permit.
- A Hawkers and Peddlers permit may also be required. Contact the Division of Standards at (617) 727-3480 for further information.

**Wholesale Seafood Broker License:**

- Allows the holder to act as an agent who negotiates contracts of purchase and sale of seafood.
- The brokerage activities will not involve the actual handling, processing or reshipping of finfish, shellfish or other marine resources.
- A "broker only" waiver (**\*see below**) must be filed in lieu of a health inspection.

**Wholesale Seafood Dealer License:**

- Allows the holder to acquire, handle, store, distribute, process, fillet, ship or sell raw fish and/or shellfish, whether frozen or unfrozen, in bulk or for resale.
- Also allows retail sales from the same single, fixed location.
- An approved inspection from the Division of Food and Drugs is required.
- A copy of the inspection report must be submitted with the application to Division of Marine Fisheries.
- The name and address must be the same on the inspection report and permit.
- This permit may be endorsed for bait (excluding shellfish), the inspection must specifically state, "**Approved for retail and Bait License**".
- Requires a HACCP plan.

**Wholesale Seafood Truck Dealer License:**

- Allows the holder to acquire, handle, distribute, ship or sell raw fish, whether frozen or unfrozen, in bulk or for resale from a truck only.
- Does not allow the holder to process raw fish, whether frozen or unfrozen, lobster or shellfish.
- Does not allow the holder to purchase shellfish or shuck, relabel or repack shellfish.
- An approved inspection from the Division of Food and Drugs is required.
- A copy of the inspection report must be submitted with the application to the Division of Marine Fisheries.

**Retail Boat License Affidavit**

I hereby request that the Division of Marine Fisheries issue me a Retail Dealer's License for sale exclusively from my boat. I certify that my dealer activities will not involve the actual processing or reshipping of finfish or other marine resources, nor will there be any buildings, processing plants or other facilities involved requiring an inspection by any Department of Public Health, local, state or federal. All finfish will be sold as "whole" fish, and lobsters will be sold alive from a floating lobster car.

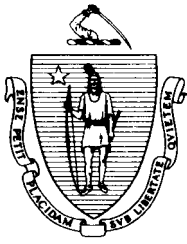
Commercial License #: \_\_\_\_\_ Boat Name: \_\_\_\_\_ MS/Doc #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Wholesale Broker License Affidavit**

I hereby request that the Division of Marine Fisheries issue me a Retail Dealer's License for brokerage privileges. I certify that my brokerage activities will not involve the actual processing or reshipping of finfish, shellfish or other marine resources, nor will there be any buildings, processing plants or other facilities involved requiring an inspection by any Department of Public Health, local, state or federal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
<http://www.state.ma.us/dph/fpp/fpp.htm>  
Division of Food and Drugs  
305 South Street, Jamaica Plain, MA 02130-3597  
(617) 983-6712 (617) 983-6770 - Fax

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**INSPECTION REQUEST  
WHOLESALE/RETAIL SEAFOOD OPERATIONS**

Name of Company:		Date/Time requested for inspection:	
Business Address:		Current Permit Number:	
City/Town, Zip		Telephone #:	
Name of Owner:		Make, Year and Registration # of Vehicle:	
TYPE OF PERMIT REQUESTED			
Retail Store: _____		Wholesale Truck: _____	Wholesale Dealer: _____
PRODUCTS REQUESTED			
Finfish _____	Scallop Meat _____	Lobster/Crabmeat _____	Bait _____
Northern Shrimp _____	Shellfish _____	Live Lobsters _____	Other _____
ACTIVITIES REQUESTED*			
Fish Processing _____	Lobster Processing _____	Shellfish Processing _____	

- If a Wholesale Dealer, a HACCP plan has been completed and implemented (inspection will not be conducted if HACCP plan is not available for review).

Yes: \_\_\_\_\_ No: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant/Owner

\_\_\_\_\_  
Date

\* Persons seeking approval for on-shore Wet Storage Activities must contact the DFD prior to requesting an inspection.